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O I P E I A P A S
JAN 09 2006
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22852 7590 10/12/2005

FINNEGAN, HENDERSON, FARABOW, GARRETT &
DUNNER
LLP
901 NEW YORK AVENUE, NW
WASHINGTON, DC 20001-4413
01/10/2006 REEYENZ 00000140 09590173

01 FC:1501 1400.00 OP
02 FEE:1501 6.00 OP

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(Depositor's name)

(Signature)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/590,173	06/09/2000	Katsushi Fujita	02860.0648	3385

TITLE OF INVENTION: COLOR PROOF FORMING METHOD AND COLOR PROOF FORMING APPARATUS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$1400	01/12/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
NGUYEN, MADELEINE ANH VINH	2626	358-518000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). <input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. <input checked="" type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	1 <u>FINNEGAN, HENDERSON,</u> 2 <u>FARABOW, GARRETT</u> 3 <u>& DUNNER, L.L.P.</u>
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

KONICA CORPORATION

TOKYO, JAPAN

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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 Publication Fee (No small entity discount permitted)
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 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 06-0916 (enclose an extra copy of this form).

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
 b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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DAVID W. HILL
Authorized Signature

Typed or printed name DAVID W. HILL

ERNEST F. CHAPMAN
Reg. No. 25,961

JAN 09 2006

Registration No. 28,220

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